



FAFSA Waiver Request
PLEASE USE BLACK INK ONLY

Semester/Year _____

Campus _____

Langston University policy requires all students to complete the current year FAFSA prior to enrolling. Students unable to complete the FAFSA can request a FAFSA Waiver through the Office of Student Financial Aid. (If the waiver is approved, 50% of the estimated charges for the semester must be paid upon registration. The balance must be paid in full or a payment plan must be set up through the Office of Student and Employee Services by the end of the Drop & Add period.)

Student Name:

Student ID:

Home Phone Number:

Alternate/Cell Phone Number:

Mailing Address:

Email Address:

I am requesting an exception: (state reason for request below)

Please Initial Next to Each Statement

_____ I understand Langston University policy requires all students to complete the current year FAFSA prior to enrolling.

_____ I realize payment for tuition and fees are due upon enrollment.

_____ I understand if waiver request is approved, I will agree to pay a 50% initial payment due upon registration with a balance paid in full or a payment plan must be set up through the Office of Student and Employee Services by the end of the Drop & Add period.

If a third party is paying, please give name, address and phone number below:

Student Signature: _____

Date: _____

SEND COMPLETED FORM TO: financial@langston.edu or srmcgill@langston.edu